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No. 1474 P. 1

TRA	NSMITTA	L OF INFORMA (Under 37 CFF	Docket No. 62542-1030							
In Re A	pplication Of	: Luis Carriere Ll	uch							
Applic	ation No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.				
10/5	61,423	12/19/05		38406	3732	6387				
Title: IMPROVEMENTS TO AN AUXILIARY ELEMENT FOR THE SEGMENTAL DISTALIZATION TO THE CANINE-TO-MOLAR POSTERIOR MAXILLARY AREA IN ORTHODONTIC TREATMENTS										
		· · · · · · · · · · · · · · · · · · ·	Address to: Commissioner for Paten P.O. Box 1450 Alexandria, VA 22313-14							
			37 CFR 1.97(b)							
1. The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.										
			37 CFR 1.97(c)							
2.	2. The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:									
	☐ the	statement specified i	n 37 CFR 1.97(e);							
÷	OR									
	☐ the f	fee set forth in 37 CF	R 1.17(p).							
		·.								

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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c)) Docket No. 62542-1030						
In Re Application of: Luis Carriere Lluch						
Application No. Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.		
10/561,423 12/19/05		38406	3732	6387	1	
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(Only complete if	Payment of Fee f Applicant elects to pay the	fee set forth in 37	GFR 1.17(p))			
□ A check in the amount of □ The Director is hereby authorized to check as described below. □ Charge the amount of □ Credit any overpayment. □ Charge any additional fee required Payment by credit card. Form PTO-20 WARNING: Information on this form	is attached. narge and credit Deposit uired. 38 is attached.	Account No.	50-0856 ormation should	d not be		
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*This certificate may only be used if payi deposit account. Mall A O'NO	~,	November 7, 20	006			
Michael A. O'Neil Michael A. O'Neil, P.C. 5949 Sherry Lane, Suite 820 Dallas, TX 75225						
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		4,861,268	8/29/1989	Garay et al.		433	229	RECEIVE CENTRAL FAX C	
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